

18  
2-1501

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
O.I.P.E. CLASSIFIER		48	1/29/01
FORMALITY REVIEW	FR	1018	2/13/01
RESPONSE FORMALITY REVIEW	A-M	5C 5870	03-23-01

**INDEX OF CLAIMS**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	3/10/00
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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